

INDIVIDUAL INCOME TAX RETURN

Married Filing Separately Status

Check here if you are filing under the Married Filing Separately status:

PRIMARY FILER INFORMATION

FIRST NAME AND MIDDLE INITIAL _____

LAST NAME _____

SOCIAL SECURITY NUMBER (SSN) _____

HOME ADDRESS (NUMBER AND STREET) _____

APARTMENT / SUITE NUMBER _____

CITY, TOWN, OR POST OFFICE _____

STATE _____

ZIP CODE _____

SPOUSE INFORMATION (REQUIRED FOR MFS STATUS)

Enter your spouse's information below, even if they are not filing with you on this return.

SPOUSE'S FIRST NAME AND MIDDLE INITIAL _____

SPOUSE'S LAST NAME _____

SPOUSE'S SOCIAL SECURITY NUMBER (SSN) _____

CHECK HERE IF SPOUSE IS ITEMIZING DEDUCTIONS ON THEIR SEPARATE RETURN (IF CHECKED, YOU MUST ALSO ITEMIZE)

DEPENDENTS CLAIMED ON THIS RETURN

First Name, Initial, Last Name	Social Security Number	Relationship to You	Check if qualifies for child tax credit
			<input type="checkbox"/>
			<input type="checkbox"/>

INCOME AND ADJUSTMENTS

Line	Income Category	Amount (\$)
1	Wages, salaries, tips (attach Form(s) W-2)	
2	Taxable interest income	
3	Ordinary dividends	
4	Pensions and annuities (taxable amount)	
5	Social Security benefits (taxable amount)	
6	Capital gain or (loss)	

Line	Income Category	Amount (\$)
7	Other income (attach schedule if required)	
8	Total Income (add lines 1 through 7)	
9	Adjustments to income (from schedule)	
10	Adjusted Gross Income (subtract line 9 from line 8)	

TAX AND DEDUCTIONS

11	Standard Deduction OR Itemized Deductions (see Spouse itemization note above)	
12	Taxable Income (subtract line 11 from line 10; if zero or less, enter 0)	
13	Tax (calculated on taxable income amount)	
14	Child Tax Credit and other non-refundable credits	
15	Net Tax Liability (subtract line 14 from line 13; if zero or less, enter 0)	
16	Federal Income Tax Withheld (from W-2, 1099, etc.)	
17	Refund Amount (if line 16 is greater than line 15, subtract line 15 from 16)	
18	Amount You Owe (if line 15 is greater than line 16, subtract line 16 from 15)	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete.

YOUR SIGNATURE

DATE

OCCUPATION